

OCT 20 2004

PTO/SB/97 (08-03)

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Application No: 10/026,001

Right Fax #: 703-872-9303

Filing Date: December 21, 2001

Applicant: Nicolette, Charles A.

Art Unit: 1642

Examiner: Misook Yu

Docket: 5050US

Transmittal; Fee Transmittal (in duplicate); Response to Restriction
Requirement mailed August 20, 2004 (3 sheets); and Petition for
Extension of Time (in duplicate).

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PTO/S 3/21 (02-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/026,001	
	Filing Date	December 21, 2001	
	First Named Inventor	NICOLETTE, Charles	
	Art Unit	1642	
	Examiner Name	Misook Yu	
Total Number of Pages in This Submission	7	Attorney Docket Number	5050US

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form (in dup.) <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply (3 sheets) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (in dup.) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Deborah A. Dugan Registration No. 37,315 GENZYME CORPORATION 15 Pleasant Street Connector Framingham, MA 01701-9322
Signature	<i>Deborah A. Dugan</i>
Date	10/20/04

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name	TARYN ANTALEK
Signature	<i>Taryn Antalek</i>
Date	10-20-2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (10-03)

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<h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2004</h3> <p style="font-size: small; margin: 5px 0;">Effective 10/01/2003. Patent fees are subject to annual revision.</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		<p><i>Complete If Known</i></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>10/026,001</td> </tr> <tr> <td>Filing Date</td> <td>December 21, 2001</td> </tr> <tr> <td>First Named Inventor</td> <td>NICOLETTE, Charles A.</td> </tr> <tr> <td>Examiner Name</td> <td>Misook Yu</td> </tr> <tr> <td>Art Unit</td> <td>1642</td> </tr> <tr> <td>Attorney Docket No.</td> <td>5050US</td> </tr> </table>		Application Number	10/026,001	Filing Date	December 21, 2001	First Named Inventor	NICOLETTE, Charles A.	Examiner Name	Misook Yu	Art Unit	1642	Attorney Docket No.	5050US
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<p>TOTAL AMOUNT OF PAYMENT (\$) 110</p>															

<p>METHOD OF PAYMENT (check all that apply)</p> <p> <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None </p> <p><input checked="" type="checkbox"/> Deposit Account</p> <p> Deposit Account Number: 07-1074 Deposit Account Name: GENZYME CORPORATION </p> <p>The Director is authorized to: (check all that apply)</p> <p> <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. </p>				<p>FEE CALCULATION (continued)</p>																																																																																																																																																																																																																																																					
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<p>*or number previously paid, if greater. For Reissues, see above.</p>																																																																																																																																																																																																																																																									

<p>SUBMITTED BY</p>				<p><i>Complete If Applicable</i></p>	
Name (Print/Type)	Deborah A. Dugan	Registration No. (Attorney/Agent)	37,315	Telephone	508-270-2556
Signature	<i>Deborah A. Dugan</i>			Date	10/20/04

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PTO SB/17 (10-03)
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U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 110

Complete if Known

Application Number 10/026,001
Filing Date December 21, 2001
First Named Inventor NICOLETTE, Charles A.
Examiner Name Misook Yu
Art Unit 1642
Attorney Docket No. 5050US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account

Deposit
Account
Number

07-1074

Deposit
Account
Name

GENZYME CORPORATION

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments
☐ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	180	2005	90	Provisional filing fee	

SUBTOTAL (1)

(\$ 0)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
20 **	0	0	0
Independent Claims	3 **	0	0
Multiple Dependent		0	0

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	88	2201	43	Independent claims in excess of 3	
1203	290	2203	145	Multiple dependent claim, if not paid	
1204	88	2204	43	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2)

(\$ 0)

** or number previously paid, if greater. For Reissues, see above.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oall	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	110
1252	420	2252	210	Extension for reply within second month	
1253	960	2253	476	Extension for reply within third month	
1254	1,460	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	280	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	400	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	
1808	180	1808	180	Submission of Information Disclosure Statement	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final re action (37 CFR § 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 110)

SUBMITTED BY

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Signature

Deborah A. Dugan

Date

10/20/04

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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OCT 20 2004

Patent
Our Docket: 50501.S

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: NICOLETTE, Charles A.) Art Unit: 1642
Serial No.: 10/026,001)
Filed: December 21, 2001) Examiner: Misook Yu
For: THERAPEUTIC ANTIGENIC)
CK18 PEPTIDES)

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450



Response to Restriction Requirement

This Communication is being filed in response to a Restriction Requirement mailed August 20, 2004. A response to this Restriction Requirement was originally due on September 20, 2004. As part of this Communication, Applicant is filing a Petition for a One Month Extension of Time, thereby extending the deadline to file a response to October 20, 2004. Accordingly, this response is timely filed.